

Charles A. Bon
Patricia Speciale

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM 720-875)

SERIAL N

10/048 198

FILING DATE

APPL(CANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2					
TOTAL DEP.						
TOTAL CLAIMS	2					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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